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36319 7590 11/09/2005  
**INSULET CORPORATION**  
**9 Oak Park Drive**  
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*R. Anthony Diehl* (Depositor's name)  
*R. Anthony Diehl* (Signature)  
 2/23/2006 (Date)

02/24/2006 TBESHAH2 00000116 503188 10695547

01 FC:2501  
 02 FC:1504

700.00 DA  
 300.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10695,547	10/28/2003	J. Christopher Flaherty	59249-164 (INSL-110CN)	3464

**TITLE OF INVENTION: DEVICES, SYSTEMS AND METHODS FOR PATIENT INFUSION**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	02/28/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
MAIORINO, ROZ	3767	604-067000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list:

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

*Insulet Corporation*

*Bedford, MA*

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
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- ☐ A check in the amount of the fee(s) is enclosed.  
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number *507188* (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*R. Anthony Diehl*

Date *2/23/2006*

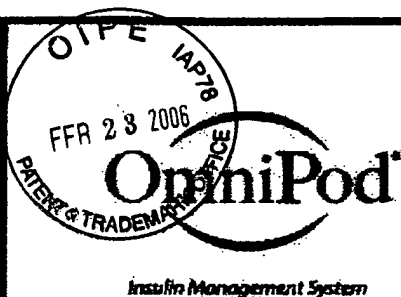
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*R. Anthony Diehl*

Registration No. *37432*

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Insulet Corporation  
9 Oak Park Drive  
Bedford, MA 01730  
Tel: 781-457-5000  
Fax: 781-457-5011  
www.MyOmniPod.com

## Fax Cover Sheet

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**To:** ISSUE and PUBLICATION FEE

**From:** R. Anthony Diehl

**Company:** US PTO

**Pages:** 3

**Fax:** 571-273-2885

**Date:** 2/23/2006

**Telephone:**

**CC:**

**Re:** U.S. App. Ser. No. 10/695547; Atty. Dckt. No. INSL-0110CN

**Comment:** Authorization to pay issue and publication fee from Deposit Account No. 503188 is attached.

Insulet Corporation